

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 EXECUTIVE CENTER DRIVE
POST OFFICE DRAWER 11649
COLUMBIA, SOUTH CAROLINA 29211
OFFICE # (803) 896-5191 FAX # (803) 896-5129

POSTED
P008906DCLASS E (HHG) 2006-238 / DATE August 29, 2005

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND
NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

Movers Not Shakers of The Carolinas, INC.

2. (a) Street Address of Applicant 52 Bobo St. Greer SC 29650

(b) Mailing address, if different from street address P.O. Box 356

Greer SC 29652

(c) Telephone Number 864-801-4433 SS No. 396

3. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of S.C., need S.C. Secretary of State "Foreign Corporation" Certificate.)

4. (a) If a partnership, names and addresses of all persons having an interest in the business.
(b) If a corporation, names and addresses of two principal officers will be sufficient.

Roland Knoke - President - 1872 Sharon Rd. Woodruff, SC 29388

Sheila Knoke - Vice President - 1872 Sharon Rd. Woodruff, SC 29388

5. (a) Class E - the proposed rates and charges for service, rules and regulations governing same are included herewith, as set forth on Exhibit "A".
(b) Class F - Contracts are included herewith.

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AUG 09 2006

PSC SC
DOCKETING DEPT.

6. The proposed commodities to be transported and the area to be served, as set forth on Exhibit "C" included herewith. Household Goods - Intrastate SC
Interstate

7. The proposed list of equipment is as per Exhibit "D" included herewith.

8. Applicant proposes to operate service applied for as follows: (Check one)
(a) Intrastate Only ✓ (b) Interstate Only _____

9. **IMPORTANT!** If application is to request reinstatement, amend, sale, lease or otherwise transfer a certificate of PC&N, a current annual report shall be on file with the Commission **before** application will be accepted. Annual report form attached for your convenience. **If application is for a NEW CERTIFICATE, DO NOT SUBMIT ANNUAL REPORT.**

10. Is applicant certified to provide **intrastate** transportation of household goods in another state? Yes _____ No ✓ (Check one).

If yes, attach a letter from the regulatory agency in the State(s) stating applicant is in compliance with the rules and regulations of said state agency.

11. Has applicant been convicted of operating with no **intrastate** household goods authority or failure to abide by the rules and regulations pertaining to the **intrastate** transportation of household goods in this state or any other state?
Yes _____ No ✓ (Check one)

If yes, list dates and nature of convictions below.

12. Has applicant ever had certificate authorizing the transportation of household goods revoked in this state or any other state?
Yes _____ No ✓ (Check one).

If yes, list dates and reason for revocation below.

13. Applicant is financially able to furnish the services as specified in this Application, and submits the following statement of assets and liabilities.

ASSETS:

Cash	<u>556</u>
Real Estates and Buildings	<u> </u>
Accounts and Notes Receivable	<u> </u>
Power Equipment (Net of Depreciation)	<u> </u>
Garage & Office Equipment	<u>14000</u>
(Net of Depreciation)	<u> </u>
Other Assets	<u> </u>
	<u> </u>
	<u> </u>
TOTAL ASSETS	\$ <u>14556</u>

LIABILITIES:

Accounts and Notes Payable	<u>13800</u>
Rents and Leases payable	<u> </u>
Mortgages Payable	<u> </u>
Debt on Power Equipment	<u> </u>
Other Liabilities	<u> </u>
	<u> </u>
	<u> </u>
TOTAL LIABILITIES	\$ <u>13800</u>
NET WORTH	\$ <u>756</u>

14. Applicant is familiar with the provision of S.C. Code Ann., §58-23-10, et seq. (1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol. 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA,]
COUNTY OF Greenville]

I, Elly Lawrence Office Manager
(Name of Applicant's Representative) (Title)

of Movers Not Shakers of the Carolinas, Inc. the Applicant for the Certificate of Public
(Applicant)

Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above Application are true and correct.

SWORN TO BEFORE ME

At 52 Boba St. Greenville SC
This the 29 day of AUG. 2012
James Burgess
(Notary Public)

Elly Lawrence
(Signature of Applicant's Representative)

My Commission Expires: 8/6/2012

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

MOVERS NOT SHAKERS OF THE CAROLINAS, INC.,
a corporation duly organized under the laws of the State of South Carolina on
August 12th, 2005, and having a perpetual duration unless otherwise indicated
below, has as of the date hereof filed all reports due this office, paid all fees,
taxes and penalties owed to the Secretary of State, that the Secretary of State
has not mailed notice to the Corporation that it is subject to being dissolved by
administrative action pursuant to section 33-14-210 of the South Carolina Code,
and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
12th day of August, 2005.

A handwritten signature in cursive script that reads "Mark Hammond".

Mark Hammond, Secretary of State

STATE OF SOUTH CAROLINA
SECRETARY OF STATE

AUG 12 2005

ARTICLES OF INCORPORATION
FOR A
STATUTORY CLOSE CORPORATION

Mark Hammond
SECRETARY OF STATE OF SOUTH CAROLINA

Movers Not Shakers of the Carolinas, Inc.

1. The name of the proposed corporation is

Movers Not Shakers of the Carolinas, Inc.

2. This corporation is a Statutory Close Corporation, formed pursuant to Chapter 18, Title 33 of the 1976 South Carolina Code, as amended.
3. The initial registered office of the corporation is

52 Bobo Street, Greer, SC 29650

and the initial registered agent at such address is

Roland C. Knoke

4. The corporation is authorized to issue a single class of shares, the total number of shares authorized is **100,000 voting shares and 100,000 non-voting.**
5. The existence of the corporation shall begin when these articles are filed with the Secretary of State unless a delayed date is indicated (See, Section 33-1-230(b)): **Upon Filing**
6. Unless specified otherwise below, the transfer of shares of stock of the corporation is subject to the restrictions set out in sections 33-18-110 thru 33-18-130 of the 1976 South Carolina Code, as amended. Specify any variations in the statutory format in §§ 33-18-110 thru § 33-18-130:

Paragraph (2) of § 33-18-110(b) (or any succeeding statute of like tenor and effect) shall not apply; therefore, in addition to other restrictions before any shares may be directly or indirectly transferred to or for the benefit of the shareholder's family they shall be first offered to the corporation pursuant to the provisions of S.C. Code Ann. § 33-18-120 (Supp. 1988)

050812-0028 FILED: 08/12/2005
MOVERS NOT SHAKERS OF THE CAROLINAS, INC.
Filing Fee: \$135.00 ORIG

Mark Hammond

South Carolina Secretary of State

7. The corporation shall have a board of directors (See § 33-18-210 of the 1976 Code).
8. This corporation **DOES NOT** elect to have the provisions of §§33-18-140 thru 33-18-170 of the 1976 Code, which give the estate of a deceased shareholder the right to compel the corporation to purchase the deceased shareholder's shares, apply.
9. The optional provisions which the corporation elects to include in the articles of incorporation are as follows (See §33-2-102 and the applicable comments thereto; and 35-2-105 and 35-2-221 of the 1976 South Carolina Code):

a. Restriction on Transfer To Prevent Loss of S Corporation Status:

At any time after the corporation has filed an S corporation election (and prior to the corporation having filed a voluntary revocation of the election pursuant to Internal Revenue Code § 1362(d)(1) of 1986, or any succeeding statute of like tenor and effect), no shares of the corporation shall be transferred either directly or indirectly, voluntarily or involuntarily, without the prior written determination of the board of directors, or by an attorney appointed by the board to give such an opinion, that the proposed transfer will not cause the S corporation election to be terminated.

Upon making such election, all shares issued by the corporation shall have conspicuously noted on the front or back of the certificate the following statement:

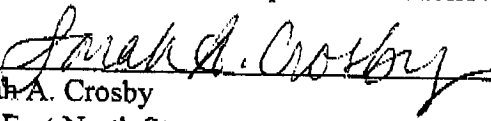
"This corporation, and its shareholders have, or intend to file an election, that the corporation be taxed under the provision of subchapter "S" of the Internal Revenue Code. This subchapter limits the number and type of persons who may own shares of this corporation.

Therefore until such election is voluntarily revoked, none of the shares represented by this certificate may be transferred in any manner whatsoever (either voluntarily or involuntarily, directly or indirectly, by pledge, sale, gift, levy, devise, succession, or any other attempted method of transfer) without the prior written consent of the board of directors or of the prior written consent of an attorney at law who is appointed in writing by the board of directors of the corporation to give such opinion, that such transfer will not cause the S corporation election to be terminated."

b. Prohibition on Issuing Shares or Accepting Loans Which Might Disqualify the Company from Being an S Corporation:

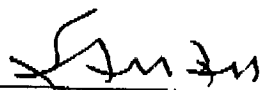
At any time after the corporation has filed an S corporation election (and prior to the company having filed a voluntary revocation of the election pursuant to Internal Revenue Code §1362(d)(1) of 1986, or of any succeeding statute of like tenor and effect), the corporation shall not (1) authorize any securities which will cause the corporation to have classes that vary other than by voting rights, nor (2) borrow money from any shareholder under terms or conditions that would cause such borrowing to be treated as an additional security or class of stock. Any such attempted borrowing or authorization of a different class of stock which violates the provisions of the first sentence of this Article #9(b), shall be void *ab initio*, and shall not be deemed to be a security or obligation of this company.

10. The name and address and signature of each incorporator is as follows (only one is required):


Sarah A. Crosby
819 East North Street
Greenville, SC 29601

11. I, **S. Allan Hill**, an attorney licensed to practice in the State of South Carolina, certify that the corporation, to whose articles of incorporation this certificate is attached, has complied with the requirements of Chapter 2, Title 33 of the 1976 South Carolina Code relating to the articles of incorporation.

Date: August 8, 2005


S. Allan Hill
Attorney at Law, CPA

Temple, Mann, Briggs & Hill
819 East North Street
Greenville, SC 29601
(864) 242-4995



STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE
INITIAL ANNUAL REPORT OF CORPORATIONS

CL-1

(Rev. 8/95)
3134

File Number _____ ENDING PERIOD _____ Month _____ Year _____ SID number _____

NAME OF CORPORATION

Movers Not Shakers of the Carolinas, Inc.

ADDRESS OF CORPORATION (NUMBER AND STREET)

52 Bobo Street

CITY AND STATE

Greenville, SC

ZIP

29650

COUNTY
Greenville

Date "Application for Charter" filed with Secretary of State AUG 12 2005

For Secretary of State Use Only

Date of "Request for authority to do business in this state" (Foreign Corp.) n/a

IRS Employer Identification Number

Business Code
(Office Use Only)

1. State of incorporation: South Carolina

2. Nature of principal business in South Carolina: Moving Service

3. Location of registered office of the corporation in the state of South Carolina is same as above in the city of _____ Registered agent at such address is Roland C. Knoke

4. Location of principal office in South Carolina (street, city and county): same as above

5. Date business commenced in South Carolina

6. Indicate date corporation closes its books: 12/31

Telephone # 864-968-0480

7. If a professional corporation, are all shareholders, one-half of the directors (or individuals functioning as directors) and all officers (other than the secretary and treasurer) qualified to practice the professional services engaged in by the corporation?

8. The names and business addresses of the directors (or individuals functioning as directors) and principal officers in the corporation are:

SSN
484-80-5317

Name/Title
Roland C. Knoke

Business Address and Office
same as above

249-19-5640

Shelia T. Knoke

same as above

9. The total number of authorized shares of capital stock itemized by class and series, if any, within each class is as follows:

Number of Shares
200,000

Class
common

Series

10. The total number of issued and outstanding shares of capital stock itemized by class and series, if any, within each class is as follows:

Number of Shares
100

Class
common

Series

11. _____ Corporation is not subject to taxes in South Carolina and has registered to comply with the provisions of SC Code Section 12-9-310; attach justification.

1. Fee due with this report

2. Interest due

3. Penalty due

4. Total - Fee, Interest and Penalty

(Make remittance payable to SC Department of Revenue.)

1. 25.00

2.

3.

4. \$ 25.00

AFFIDAVIT

I, the undersigned incorporator or principal officer of the corporation for which this return is made, declare that this return, including accompanying statements and schedules, has been examined by me and is to the best of my knowledge and belief a true and complete return made in good faith.

S. Allan Hill

THIS RETURN PREPARED BY

8-8-05

DATE

SIGNATURE OF INCORPORATOR OR OFFICER AUTHORIZED TO SIGN

Incorporator

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

POST OFFICE DRAWER 11649
COLUMBIA, SC 29211

Movers Not Shakers of the Carolinas, Inc.
(APPLICANT)

52 Bobo St. Greer SC. 29650
(ADDRESS)

Proposed Rates and Charges for Service

And Rules and Regulations Governing Same Are As Follows:

Plan on joining the SC Tariff Bureau

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

Post Office Drawer 11649
Columbia, South Carolina 29211

Movers Not Shakers of the Carolinas Inc.
(Name)

52 Bobo St. Greer SC. 29650
(Address)

Over Irregular Routes:

Commodities to be Transported:

Household Goods, As Defined in R. 103-210(1):

Area to be Served: (List counties in detail)

Between points and places in South Carolina

Movers Not Shakers of the Carolinas Inc.
(Applicant)

Date: 8/29/05

Elly Lawrence
By

Office Manager
Title

INSURANCE QUOTE

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The following insurance quote is for:

Movers Not Shakers of the Carolinas Inc.
(Name of Motor Carrier)

52 Bobo St. Greenville SC 29650
(Address of Motor Carrier)

Amount of Premium:

Limits Quoted (See Below):

Liability Insurance \$ 1,000,000 Limits \$4,800.00

Cargo Insurance \$ 50,000 Limits 2,500.00

* Attach Certificate of Insurance if available.

Clarendon National Ins. Co.
(Insurance Company Name)

1177 Ave of the Americas, New York, NY. 10036
(Home Office Address of Company)

is familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

5/24/06
Date

[Signature]
(Authorized Insurance Company Representative)

EXHIBIT FWA

Name: Movers Not Shakers of the Carolinas, Inc.

Address: 52 Bobo St. Greer SC 29650

Telephone No. 864-801-4433 Fax No. 864-801-4499

U.S.D.O.T. No. 1408418 ICC No. 526655

1. Does Applicant have a Safety Rating from the U.S.D.O.T.?

Yes _____ No ✓ Pending _____ (Submit when received)
(If "yes", indicate rating and provide copy) Satisfactory _____
Conditional _____
Unsatisfactory _____

2. Have any of Applicant's drivers or vehicles been placed "out of service" by Transport Police safety officers in the past twelve (12) months?

Yes _____ No ✓

3. Are there currently any outstanding judgement(s) against Applicant?

Yes _____ No ✓
(If "yes", indicate nature of judgement(s).)

4. Is Applicant familiar with all statutes and regulations, including safety regulations, governing for-hire motor carrier operations in South Carolina and does applicant agree to operate in compliance with these statutes and regulations?

Yes ✓ No _____

5. Is the Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

Yes ✓ No _____
(The attached Insurance Quote form must be completed, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide copy of insurance policies unless requested.)

Elly Lawrence
(Applicant's Signature)

Sworn to before me

At 52 Bobo St. Greer SC

This 29 day of AUG. 2012

James Burgess
(Notary Public)

Commission Expires: 8/6/2012

Detach, complete and remit AFTER your safety audit has been performed by State Transport Police.

Elly Lawrence
(Applicant's name)

SAFETY CERTIFICATION

If your operations are subject to Safety Fitness Procedures of the Federal Motor Carrier Safety Regulations (FMCSR) (49 CFR Parts 100-199), even if you have not yet received a Safety Fitness Rating, you must certify as follows:

Applicant has access to and is familiar with all applicable U.S.D.O.T. regulations relating to the safe operation of commercial vehicles. In so certifying, applicant is verifying that, as a minimum, it:

1. Has in place a system and an individual responsible for ensuring overall compliance with the FMCSR and the HM regulations;
2. Can produce a copy of the FMCSR and the HM regulations;
3. Has in place a driver safety/orientation program;
4. Is familiar with the FMCSR governing driver qualifications and has in place a system for overseeing driver qualification requirements in accordance with 49 CFR Part 391.51C;
5. Has in place policies and procedures consistent with FMCSR governing driving and operational safety of commercial motor vehicles, including drivers' hours of service and vehicle inspection, repair and maintenance (49 CFR Parts 392, 395 and 396);
6. Are in compliance with the Controlled Substance and Alcohol Use and Testing as stated in FMCSR (49 CFR Part 40, 382, if applicable).

Any applicant who certifies they are in compliance with FMCSR and/or the HM regulations and upon completion of a compliance review audit, is found not to be in compliance, may have its certificate revoked.

PLEASE CHECK THE APPROPRIATE BOX	
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NOT APPLICABLE

EXEMPT APPLICANTS - If you will operate only small vehicles (GVWR of 10,000 pounds or less) and do not transport hazardous materials in a quantity to require placarding under the HM regulations and are thus exempt from the FMCSR and HM regulation, you must certify as follows:

Applicant is familiar with and will observe FMCSR general operational safety fitness guidelines

PLEASE CHECK THE APPROPRIATE BOX	
<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NOT APPLICABLE

APPLICANT'S OATH

I, Roland Knoke, verify under penalty of perjury under the laws of the State of South Carolina, that all information supplied on this form or relating to this application is true and correct. Further, I certificate that I am qualified and authorized to file this application. I know that willful misstatements or omissions of material facts constitute criminal violations punishable by imprisonment and fines as prescribed by law. (Note: This oath embraces all schedules and supplemental filings to this application).

Sworn to before me

at 52 Bobo St Greer SC

this 29 day of AUG 2005

James Bunger
Notary Public


Signature of Applicant
(Not Legal Representative)

August 9, 2006

Public Service Commission of SC

Attn: Janice

Fax – 803-896-5199

Movers Not Shakers of the Carolinas, Inc.

DOT – 1408418

MC – 526655

FEIN – 20-3305396

For your information – If you need this.

If you have any questions, this is my project, call me at 864-801-4433.

Thanks – Elly Lawrence

Total-15 pages